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PTO/SB/83 (03-02)

Approved for use through 10/31/2002. OMB 0651-0035

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/002,384
Filing Date	October 26, 2001
First Named Inventor	Scott J. Swartz
Group Art Unit	2164
Examiner Name	
Attorney Docket Number	7840-82952

To: Assistant Commissioner for Patents
Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

The client, Star Enterprises, has failed to pay one or more bills rendered by the practitioner for an unreasonable period of time.

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- ☐ The correspondence address is NOT affected by this withdrawal.
- ☒ Change the correspondence address and direct all future correspondence to:

CORRESPONDENCE ADDRESS

☐ Customer Number

Place Customer Number
Bar Code Label here

OR

☒ Firm or
Individual Name Mr. Scott J. Swartz and Ms. Tamara Alwine

Address Star Enterprises

Address 19200 Space Center Boulevard, Suite 2621

City Houston State TX ZIP 77058

Country USA

Telephone 281-286-9956

Fax

- ☒ This request is made on behalf of myself and
- ☒ all the attorneys/agents of record,
 - ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
 - ☐ the attorneys/agents associated with Customer Number

This request is enclosed in triplicate (including any attachments).

Name Jon P. Christensen, Reg. No. 34,137

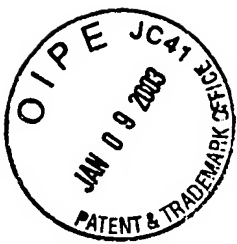
Signature

Date

January 3, 2003

NOTE: Withdrawal is effective when approved rather than when received.

Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.



Certificate of Mailing

Date of Deposit: January 3, 2003

I hereby certify that this paper is being deposited with the United States Postal Service: Post Office to Addressee. Service is on the date indicated above and addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.

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